

An experiment in Boston, Mass., suggests that a venereal disease agency can provide the generalized experience in public health required for graduate nursing students.

A Specialized Agency for Field Instruction in Public Health

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FOR YEARS nursing schools have been confronted with a shortage of facilities that can provide generalized field instruction in public health for their students. Some schools have been forced to abandon the practice of placing their students in field agencies; others, to restrict the number so placed because of quotas imposed by allocation committees. But, despite the shortage, most collegiate schools of nursing require that every student in the general nursing program complete 8 weeks of generalized field instruction in public health to qualify for the bachelor of science degree, whether the student intends to enter clinical nursing or public health nursing.

The most obvious solution to this problem is to increase the number of facilities. Philosophically, this is a sound objective, but, practically, there are many obstacles.

Since the primary function of public health agencies is to serve the public, only within the limits of their personnel and money can they

help in the education of undergraduate and graduate nurses. Voluntary agencies usually have less money and fewer personnel than they need for their immediate objectives. In addition, their decreasing caseload, which is a result of more and more patients being treated in outpatient departments instead of at home, makes for less diversity of case material. Official agencies, too, are usually hard pressed for sufficient money and personnel to perform the day-to-day activities prescribed by law.

Thus, it seems that any material increase in educational facilities must await additional funds from a population aroused to the need for such facilities. In the meantime, we must consider other possibilities for alleviating the shortage.

In Boston, Mass., we have explored the use of a specialized agency, the division of venereal diseases of the Massachusetts Department of Public Health, for generalized field instruction in public health for nurses. A specialized agency for generalized public health experience is an apparent contradiction in terms. However, our experiment suggests that a specialized agency can fulfill the requirements set down for generalized field instruction.

Events Leading to the Experiment

In the fall of 1948, the Boston College School of Nursing had a large number of graduate

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students who were planning to teach in schools of nursing after graduation. They had a broad clinical background, but they needed experience in a number of different fields of public health nursing, among them venereal disease control. Accordingly, arrangements were made with the division of venereal diseases in the Massachusetts Department of Public Health for a 1-week observation period.

The nurses were so enthusiastic about this experience that a careful study of their evaluation reports was made, followed by personal interviews. The students recommended that the period of field instruction be extended to allow them to participate actively in the division's program by doing contact interviewing and investigation. They reiterated that the 1-week observation period had been worth while for them both as nurses and as "people." Two of the nurses said that they had begun to see the venereal disease problem in a new light and felt sure that they would be better teachers for their experience.

In accordance with the requests from the students, the field instruction period was extended from 1 week to 2 weeks, and later to 4 weeks. A graduate of the Boston College School of Nursing, who majored in public health nursing, found the instruction comparable to that received in a generalized nursing agency. She recommended that the division of venereal diseases be considered as an agency for generalized public health nursing experience.

In view of the growing enrollment at the Boston College School of Nursing and the increasing difficulty of placement in the Greater Boston area, the school decided to explore the division of venereal diseases as a possible agency for an 8-week field instruction program. In the summer of 1952, Easter, a member of the school staff, worked in the division as a nurse epidemiologist, substituting for various members of the staff while they were on vacation. She was thus able to obtain firsthand information concerning the division's program, the qualifications of the supervisors and field personnel, and the type of experience a nursing student might expect to receive there.

This worker quickly became familiar with the basic pattern of the work of venereal dis-

ease nurse epidemiologists. She perceived that these specialized nurses interested themselves not only in the possible presence of venereal disease but also in its impact on the patient and his family, that they were concerned with discovering why patients became sexually promiscuous, why extramarital exposures took place, and kindred matters, and that through skillful inquiry they became familiar with other medical, social, and emotional problems in the family, some of them totally unrelated to the disease itself.

In short, the venereal disease nurse epidemiologists practiced generalized public health nursing, using the specific problem of venereal disease as their mode of approach to the family. This is not surprising when one realizes that the epidemiologist has had generalized public health training and experience before she specializes.

After 2 months' experience, the school staff member was convinced that the division of venereal diseases was a valuable source of experience in generalized public health. But would field instruction received in the division constitute the generalized educational experience required for university academic credit? This question needed careful and exact evaluation. Fortunately, criteria were available for measuring an agency's qualifications. These criteria fall into the following groups.

Qualified personnel: The students must receive field instruction under qualified public health nursing supervision in a public health agency which stresses family health. The field teachers, as well as the supervisors, must be adequately trained and qualified public health nurses.

Student experiences: The students must gain experience in family health teaching in the following areas: prenatal, postnatal, infant, preschool, school, adolescent, and adult health, geriatrics, chronic diseases, and rehabilitation.

Staff education: There must be a continuing and adequate program of staff education for the members of the public health agency.

Qualified Personnel

The division of venereal diseases, as one of the operating divisions of the Massachusetts Department of Public Health, is a State agency. It is charged by law with providing an adequate

program in the prevention and control of venereal diseases. It is also a medical care division in that it provides diagnostic and treatment services for those who have, or suspect they have, a venereal disease and are unable to afford private medical care.

The division has a statewide epidemiological service for the interviewing of patients and the followup of their contacts. Concerned with the field training program are the medical director, two public health nursing supervisors, and seven field instructors who are called nurse epidemiologists.

The director is a graduate of an approved school of medicine and the Harvard School of Public Health. He has had 6 years' experience in generalized public health as a district health officer and has specialized in the venereal diseases since 1947. He is a diplomate of the American Board of Preventive Medicine and Public Health and is a lecturer and staff member of the several medical schools and hospitals in Boston.

The two public health nursing supervisors have their certificates in public health. One has had 1 year of experience and the other 12 years with a visiting nurse association. They have had 14 and 17 years' experience, respectively, in the field of venereal diseases.

The field instructors have also had generalized training and experience before specializing. All of them have a certificate in public health nursing.

Experience in Family Health Teaching

The experience one gains from any teaching situation is a product of the interaction of a number of factors, including what the person brings into the situation from prior training and experience, the formal and informal instruction given by the agency, the facilities available, the supply of case material, the quality and quantity of supervision.

At conferences between the nursing school and division staffs, it was agreed that the minimal educational background and experience of a graduate nurse prior to her field instruction should be completion of all academic requirements of the baccalaureate curriculum for graduate nurses. As soon as the school knows what students are to be sent on field instruction,

copies of the students' educational achievement and experience are sent to the director of the division, together with the dates for their assignments.

Every graduate nursing student assigned to the division of venereal diseases receives the following instruction and experience over a period of 8 weeks:

1. Orientation on organization of the department of public health and the division of venereal diseases; the program of the division and how it is implemented; the division's relationship to other agencies. This is conducted by the medical director, the supervising public health nurses, and the senior clerical staff, on the first day of the nurse's assignment to the division and occupies 1 full day.

2. A 6-hour lecture course on the clinical and public health aspects of the venereal diseases. The clinical lectures are given by the medical director, and the public health lectures, by one of the nursing supervisors.

3. Demonstrations by the division director and by clinic physicians of active cases of gonorrhea and syphilis in State-cooperating venereal disease clinics.

4. Observation during the first 2 weeks of the principles and practices of contact interviewing and investigation. The student is assigned to observe in several districts, each district representing a different phase of the program.

5. Assignment of the student as assistant to a public health field nurse for the remaining 6 weeks. She is given cases to work up, including contacts, suspects, and lapsed cases. At first, the field nurse accompanies the student. Subsequently, 1 to 2 weeks later, the student is assigned to investigate cases by herself, but at the end of each day she reports to her field supervisor and discusses her cases with her. She also visits patients accompanied by the supervisor, who observes the following:

- Does the student establish rapport easily?
- Is the student aware of other problems the patient may have?
- What is the impact of this disease on the patient?
- What is the impact of this disease on the family?
- Are there any problems of the family which directly or indirectly contributed to the devel-

Reported venereal disease contacts and suspects in Boston, Mass., by age and marital status, 1955

Age group	Single	Married	Widowed	Divorced	Separated	Not stated	Total
<i>Contacts</i>							
Under 1.....	95	0	0	0	0	0	95
1-4.....	20	0	0	0	0	0	20
5-9.....	26	0	0	0	0	0	26
10-14.....	20	0	0	0	0	0	20
15-19.....	49	10	0	1	0	15	75
20-24.....	139	69	1	8	22	94	333
25-29.....	63	64	1	6	28	96	258
30-34.....	20	46	1	7	20	67	161
35-39.....	8	31	4	5	9	39	96
40-44.....	1	16	0	4	9	17	47
45-49.....	6	14	0	2	1	3	26
50-54.....	3	9	1	1	1	4	19
55-59.....	0	7	0	0	1	3	11
60-64.....	0	6	0	0	0	0	6
65-69.....	0	8	0	0	1	1	10
70 and over.....	0	2	1	0	0	0	3
Not stated.....	9	40	0	4	2	40	95
Total.....	459	322	9	38	94	379	1,301
<i>Suspects</i>							
Under 1.....	0	0	0	0	0	0	0
1-4.....	0	0	0	0	0	0	0
5-9.....	3	0	0	0	0	0	3
10-14.....	2	0	0	0	0	0	2
15-19.....	7	0	0	0	0	2	9
20-24.....	13	14	1	0	2	11	41
25-29.....	18	19	0	1	3	6	47
30-34.....	12	24	0	1	10	7	54
35-39.....	7	29	0	4	8	9	57
40-44.....	3	20	5	4	3	11	46
45-49.....	2	13	5	4	3	8	35
50-54.....	4	19	2	1	6	7	39
55-59.....	7	17	5	0	4	7	40
60-64.....	6	19	3	2	4	3	37
65-69.....	6	14	15	1	4	1	41
70 and over.....	5	4	5	2	2	0	18
Not stated.....	0	5	0	0	0	10	15
Total.....	95	197	41	20	49	82	484

opment of venereal disease or sexual promiscuity; for example, divorce, separation, desertion, maladjusted marriage, illegitimacy, unfavorable environment?

- Are there other problems in the family not related to venereal disease? These may be medical, social, economic, moral, or environmental.

- Is the patient pregnant? If so, does the student inquire about prenatal care?

- Is the student aware of other agencies, and does she refer problems to them?

- Is she an effective teacher?

The system of instruction used by the division of venereal diseases has several advantages. First, one qualified field instructor is assigned to each student. Second, the student is pre-

pared for the actual "doing" experience by didactic and observational teaching. Third, there is an adequate caseload and a sufficiently varied group of patients for the students to gain experience in the areas enumerated above; this is apparent when one examines the amount and quality of the case material.

During 1955 a total of 1,785 contacts and suspects were investigated in Boston by the division of venereal diseases. These represent the potential family case studies made by the division staff. The distribution by age groups and marital status, shown in the table, indicates that the students had an opportunity for experience in the specific areas of family health mentioned.

During 1955, 16,986 visits for venereal dis-

ease were recorded in the Boston hospitals to which the graduate nurse students were assigned during their field training. This gave the students an opportunity to gain experience in contact interviewing and also the chance to see a number of varied types of clinical cases.

We conclude that the students had adequate field supervision and that they were exposed to a sufficient number and diversity of cases to give them experience in the specific areas of family casework listed above.

Staff Education

An interested and well-informed staff is basic to the success of any program. The division of venereal diseases, therefore, has a continuing educational program designed to meet the needs of the staff. Not only are the latest fruits from research laboratories reported, but the staff participates in the division's research projects.

Each member of the nursing staff has been sent to the Alto Medical Center in Georgia for intensive postgraduate training in contact interviewing. Furthermore, staff education meetings are held regularly each month from October through June.

At the education meetings, the staff nurses have an opportunity to hear guest lecturers preeminent in their fields, many of whom are from other States. For example, during the fiscal year 1955, our out-of-state guest speakers included Dr. Evan Thomas of New York and Dr. John Cutler of Washington, D. C. The former discussed immunity in syphilis, and the latter, the results of the long-term study of untreated syphilis. Another guest speaker was Dr. Roy E. Ritts, Jr., of the Peter Bent Brigham Hospital and Harvard Medical School, who spoke on present-day antibiotics and some of the new antibiotics under research study. Dr. John L. Fromer, chief of allergy and dermatology at the Lahey Clinic, discussed allergy in syphilis, thus bringing into clinical focus the discussions of Drs. Thomas and Ritts. At one meeting, a symposium on gonorrhea was held. The guest speakers were Dr. B. G. Clark, assistant professor of urology, and Dr. George W. Mitchell, professor of gynecology, at Tufts University School of Medicine. One

spoke on gonorrhea in the male, and the other, on gonorrhea in the female.

Principles of Supervision

During her field experience, the student becomes de facto a member of the venereal disease program staff and is subject to the rules and policies of the division. However, supervision of all workers, including the students, is based on democratic principles. The impact of this approach on the student may be deduced from the excerpts of students' evaluation of their field instruction.

"The entire situation was new to me, and I believe that this experience will broaden my narrow outlook on venereal disease and its effect upon family living. Most valuable to me was to observe workers functioning in a highly democratic atmosphere. I am more convinced than ever that this is the way an organization should be administered."

"This experience should be part of the education of every graduate nurse. What impressed me most of all was the sense of individual responsibility on the part of the epidemiologists. . . . They are presumed to be mature, reliable, professional people and are treated as such at all times."

While she is with the division of venereal diseases, the student nurse participates in the staff education program and in staff conferences. Individual conferences are held with the director, the supervisory nurses, and the field instructors. With the latter, they are held daily.

Once each week, the students return to the school for seminars with other nurse students who are affiliated with other agencies. A representative of the division of venereal diseases supervisory staff is present. The seminar is conducted by the faculty members, and the students are asked to relate their experiences and bring up cases for discussion. The entire group informally discusses the cases presented from the point of view of management, errors of omission or commission, the use of existing agencies, the current thinking in that area of public health, and the achievement of the objectives of family case work. In addition, the student is asked whether her own objectives of the field

experience have been attained and whether she has been forced to change her concepts of public health either by broadening them or making a radical readjustment.

Evaluation of the Students

Evaluation of the students' work is both objective and subjective. Fortunately, in venereal disease control there are objective yardsticks which measure the efficiency of a worker. These are the various indexes, such as the contact-patient index, the ratio of contacts discovered to contacts named, the epidemiological index, and the lesion-to-lesion index. These objective evaluations are applied to the student. The subjective evaluation is based on the reports of the field and central office supervisors. Every field supervisor is required to give a personal evaluation of the student every 2 weeks. A final written report on the student is submitted at the conclusion of the field instruction by the director of the division of venereal diseases.

The last phase of the evaluation is the student's opinion of the agency and the quality of instruction received. This evaluation may be best summed up in the words of the students themselves:

"This was by far the most interesting 8 weeks I have ever spent. It made me aware of the problems involved in cleaning out venereal disease from my city. I was also fortunate in that I had an opportunity to observe what these people are doing in the way of an inservice program in order to keep abreast of things in their own field. Then the same week we were able to observe the close association between the civilians and the armed services in an attempt to keep the venereal disease rate down. It is grati-

fying to see how much is actually being done that we never hear about. I think that the epidemiologists are the most interested of all public health nurses in the education of nurses."

"This field experience was very educational and interesting. The visits to the homes in the district were by far the most valuable to me, and I now wish that the training could have been longer. I regard this as one of my very best experiences even though I do not plan on public health nursing for a career. When taking care of hospitalized patients, I will have a better understanding of the patient, particularly from such an environment and with great emotional needs."

Summary

The shortage of adequate facilities for field instruction in public health led us to investigate the use of a specialized public health agency for generalized experience. On critical examination, the division of venereal diseases of the Massachusetts Department of Public Health was found to be a suitable organization for this purpose.

This agency has adequately trained and well-qualified personnel. It provides one qualified field supervisor for each graduate nurse student, a ratio which is seldom achieved in other agencies.

An adequate supply and a diversity of cases provide full opportunity for experience in family health teaching in the areas of prenatal and postnatal care, infant, preschool, school, adolescent, and adult health, geriatrics, chronic diseases, and rehabilitation.

The division of venereal diseases has a well-organized and effective staff education program in which the nursing students participate.